

# ANNUAL REPORT

OF THE

# HEALTH

OF THE

# WHITBY URBAN DISTRICT

FOR THE YEAR 1909.

BY

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WHITBY :

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# Annual Report

of the Medical Officer of Health for the  
District of Whitby for the  
Year 1909.

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*To the Chairman and Members of the  
Urban District Council.*

GENTLEMEN,

I have the honour to present to you my Ninth Annual Report on the Health and Sanitary condition of the District for the year 1909, and again I wish to thank you for the ready help that I have obtained in connection with the work of my department from the members of the Council. The year has, unfortunately, been a record one for infectious illnesses, as we have had the biggest epidemic of Scarlet Fever that I remember, or that I can find any records of; and we have also broken our record in another way—in that we have had two small outbreaks of Typhoid Fever, a disease which is so unusual here that in the last ten years I have only had four cases of unimported Typhoid notified to me. I am glad to say that, at the end of the year, there is not, so far as I know, a single case of infectious disease in the town. The corrected Death-Rate for the year is 14.29 per 1,000, the Zymotic Death-Rate is .25 per 1,000, and the rate for diseases scheduled under the Infectious Diseases Act is .25 per 1,000.

My report is divided into 5 parts, as under :—

- 1.—VITAL STATISTICS, including an account of the Births, Deaths, Population, and Infectious Diseases.
- 2.—SANITARY WORK, including the Inspector's Report, action taken during the year in regard to milk and food, and in connection with the Housing of the Working Classes.
- 3.—Work done in the ISOLATION HOSPITAL.
- 4.—Report on the MEDICAL INSPECTION OF SCHOOL CHILDREN as carried out in the Schools in the Urban District.
- 5.—Work under the WORKSHOPS AND FACTORIES ACT of 1901.

## 1.—VITAL STATISTICS.

The population of the town at the last census was 11,728. This is now less, although it is difficult to exactly estimate to what extent. Many men who used to live here have gone north in search of work, and some of those, who have found it, have houses here, and their families still live here, the men coming backwards and forwards. On the other hand, a number of men have come here, and have brought their families, attracted by the work at the Harbour. Again, a fair number of persons have migrated into the country round about, and will now be included in the Rural District; so that it is by no means easy to estimate the number of the population at the present time. The area of the district is 2,009 acres, which gives an average of 5.8 persons per acre.

1. BIRTHS.—During the year, 278 births have been registered, which is about the average. The following table gives the number of births during the last 5 years :—

a.	In 1909	...	...	...	278
	,, 1908	...	...	...	276
	,, 1907	...	...	...	236
	,, 1906	...	...	...	277
	,, 1905	...	...	...	268

b. The following table gives the number in each quarter :—

			1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
Whitby	...	Boys	... 23	... 23	... 26	... 27
		Girls	... 21	... 31	... 30	... 12
Ruswarp	...	Boys	... 12	... 11	... 7	... 10
		Girls	... 11	... 7	... 11	... 8
Helredale	...	Boys	... 1	... 1	... 0	... 1
		Girls	... 0	... 2	... 1	... 2
			—	—	—	—
			68	75	75	60
			—	—	—	—

c. Number registered in each Sub-District :—

Whitby	...	...	...	193
Ruswarp	...	...	...	77
Helredale	...	...	...	8

d. The Birth-rate for the quarters is as follows :—

		1st Quarter		2nd Quarter		3rd Quarter		4th Quarter
For all Districts	...	5.77	...	6.37	...	6.38	...	4.25

e. For the year, it is 23.6 per 1,000.

f. The number of illegitimate births is as follows :

			1st Quarter		2nd Quarter		3rd Quarter		4th Quarter		Total
Whitby	Boys	...	3	...	0	...	2	...	4	...	10
Ruswarp		...	0	...	0	...	1	...	2	...	3
Helredale		...	0	...	0	...	0	...	0	...	0
Whitby	Girls	...	4	...	3	...	2	...	0	...	9
Ruswarp		...	0	...	0	...	1	...	0	...	1
Helredale		...	0	...	1	...	0	...	0	...	1
											—
											24
											—

g.—The illegitimate birth-rate is 8.6 per cent.

2. DEATHS.—During the year, 180 deaths have been reported to me by the Registrar, of which 75 were males, and 105 females. 18 deaths occurred in the Union Workhouse, and 11 in the Cottage Hospital. Included in the returns are 12 who were non-residents, who died either in the town or in one of these public institutions; and these are excluded from the total in arriving at the corrected death-rate. The death-rate, including these, is 15.32 per 1,000, and, corrected for non-residents, it is 14.29 per 1,000.



a. The following tables gives the causes of death in a tabular form :—

	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	Total
Acute Inflammatory					
Diseases of Chest ...	3	4	1	4	12
Chronic Bronchitis ...	1	0	0	0	1
Acute Pleurisy ...	1	0	1	1	3
Empyema ...	0	0	0	1	1
Phthisis ...	3	3	1	4	11
Tubercle of Spine ...	0	1	0	0	1
Other Tubercular Diseases	3	0	0	1	4
Mastoid Disease ...	0	0	0	1	1
Chronic Diseases of					
Brain & Spinal Cord ...	5	5	3	7	20
Epilepsy ...	1	0	1	0	2
Convulsions ...	2	0	0	0	2
Meningocele ...	0	0	1	0	1
Meningitis ...	0	0	0	1	1
Colitis ...	0	1	0	0	1
Perforating Gastric					
Ulcer ...	0	1	0	0	1
Appendicitis ...	1	0	1	0	2
Imperforate Anus ...	1	0	0	0	1
Hernia ...	1	0	0	0	1
Ulcer of Colon ...	1	0	0	0	1
Acute Intestinal					
Obstruction ...	0	0	1	0	1
Acute Enteritis ...	0	0	2	1	3
Cardiac Disease ...	6	3	4	7	20
Syncope ...	0	1	0	0	1
Cancer ...	4	3	1	3	11
Epithelioma ...	0	0	1	0	1
Lymphadenoma ...	0	0	1	0	1
Congenital Debility ...	4	3	4	0	11
Cystitis ...	0	1	0	0	1
Eclampsia ...	1	0	0	0	1
Renal Disease ...	1	0	2	0	3
Disease of Prostrate ...	0	0	1	0	1
Exophthalmic Goitre ...	0	2	0	0	2
Pernicious Anæmia ...	0	1	0	0	1
Diabetes ...	1	1	1	1	4
Diabetes Insipidis ...	0	0	1	0	1
Child-birth ...	0	0	1	1	2
Puerperal Fever ...	1	0	0	0	1
Senile Decay ...	9	5	5	8	27
Dentition ...	1	1	0	0	2
Hip Disease ...	0	1	0	0	1

Rickets	...	...	...	...	0	...	1	...	0	...	1	...	2
Marasmus	...	...	...	...	1	...	0	...	0	...	0	...	1
Rheumatic Fever	...	...	...	...	1	...	0	...	0	...	0	...	1
Dipsomania	...	...	...	...	0	...	0	...	1	...	0	...	1
Erysipelas	...	...	...	...	0	...	1	...	0	...	0	...	1
Scarlet Fever	...	...	...	...	0	...	1	...	0	...	0	...	1
Uncertain	...	...	...	...	1	...	0	...	1	...	1	...	3
Coroner's Inquests—													
Accidents	...	...	...	...	2	...	1	...	1	...	1	...	5
Natural Causes	...	...	...	...	0	...	2	...	0	...	0	...	2
				—		—		—		—		—	
				56		43		37		44		180	
				—		—		—		—		—	

b. The death-rate for the various quarters is as follows:—

	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
Total	4.7 per 1,000	3.66	3.14	3.74
Corrected	4.5	3.23	2.8	3.74

c. For comparison, the following table gives the number of deaths in the last 5 years:—

In 1909	...	...	...	180
„ 1908	...	...	...	193
„ 1907	...	...	...	201
„ 1906	...	...	...	169
„ 1905	...	...	...	195

d. The ages at which the deaths occurred are as follows:—

	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	Total
Under 1 year	9	7	8	2	26
Between 1 and 5 years	4	3	0	0	7
„ 5 and 15 years	3	0	1	3	7
„ 15 and 25 years	3	2	2	3	10
„ 25 and 65 years	18	15	10	12	55
Over 65 years of age	19	16	16	24	75
				—	—
				56	43
				—	—
				37	44
				—	—
				180	

e. 63 persons have reached the age of 70 years, 31 have reached 80, and 2 have attained to 90 years of age, or upwards; so that more than one-third of the total is made up by persons of 70 years or upwards, and one-sixth by persons who were 80 years old or more.

f. The death-rate from Phthisis is .93 per 1,000, and from all Tubercular diseases it is 1.3 per 1,000.

g.—The deaths from Infectious Notifiable Diseases are one from Puerperal Fever, one from Erysipelas, and one from Scarlet Fever. This gives a Zymotic Death-Rate of .25 per 1,000.

h. The Infantile Mortality (i.e., the number of deaths registered of children under 1 year for every 1,000 births) is 93.5, which is the lowest that it has been since 1903, when it was 92.1.

In 1908	it was	108
„ 1907	„	129
„ 1906	„	126
„ 1905	„	108.2
„ 1904	„	110.6

INFANTILE MORTALITY.—I have, at one time or another, dealt with this subject at some considerable length. I am inclined to think that the work of reducing this blot in our statistics should be commenced at school, and that girls ought to be taught to look after children, and to bring them up with a reasonable prospect of not only living, but living, and growing up healthy men and women. I believe that, if all girls in the upper standards of the schools were taught how to feed and clothe young children, and keep them clean, we should in the future have a much smaller infantile mortality. It seems shameful, in these days, when so much is known about sanitation, hygiene, and feeding from a scientific point of view, that 1 in 10, or more, of the babies that are born are allowed to die because proper knowledge is not given to the girls who will eventually become mothers, and that they are allowed to leave school without being taught even a small amount of the elements which would enable them to help to reduce these dreadful figures, which, year by year, are found in the reports of Medical Officers of Health. I should again like to bring forward the necessity for a Health Visitor, who could, I think, help very materially in reducing these figures; and I again make the suggestion that someone might be found who is fit for the double duty of Health Visitor and School Nurse. It would then be useful to adopt the Notification of Births Act; but, without the help of a Health Visitor, there does not seem to me to be much use in adopting this Act.

THE NOTIFICATION OF INFECTIOUS DISEASES.—The Act dealing with this was adopted here in 1891. During this year, we have easily broken all records, so far as Whitby is concerned, as we have had no fewer than 123 notifications of



Scarlet Fever; but, at the end of the year, I am able to report that I have not had a notification since September, except in the case of a man, who came home from Durham with the disease. Our record has also been broken by the notification of 11 cases of Enteric Fever. These occurred in two batches; one came from the milk supply, and the other started in the Workhouse, and, I believe, was imported in the first instance. The following table gives the notifications which I have received this year:—

	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	Total
Scarlet Fever .....	53	52	17	1	123
Erysipelas .....	4	11	4	4	23
Diphtheria .....	0	2	4	1	7
Enteric Fever .....	1	0	5	5	11
Puerperal Fever ...	1	0	1	1	3
Phthisis .....	3	2	0	4	9
	62	67	31	16	176

DIPHTHERIA has never been a common disease here; this year we have had 7 notifications, of which 3 in the third quarter were imported—one from Leeds and two from Hartlepool. The rest seem to have been sporadic cases, such as any town is liable to. Two of the cases were treated in the Isolation Hospital, and both recovered.

PUERPERAL FEVER.—I have had 3 notifications this year, and one of these proved fatal. Two out of the three were in midwives' practice, and, as I said last year, it is surprising that more cases of this kind do not occur. I have in each of these cases stopped the midwife's work, and had all the contents of her bag disinfected. In none of the cases has there been any spread of the disease.

TUBERCULAR DISEASES ACT of 1908 has made it compulsory for all cases of Phthisis having help from the parish to be notified to the Medical Officer of Health, and I have had 9 such during the year. I wish all cases of Phthisis had to be notified; and I think it will not be long before this is the case.

SCARLET FEVER.—At the end of last year, I reported that we had had some cases in connection with the Cliff Street School, which I recommended the Council to close. This was done on December 2nd, and, at the time of writing my Report, I made the following comment:—"That I have been a fortnight without a notification." The New Year opened

with a notification from a house on the railway, and then began the biggest epidemic that I can remember. The cases seemed to centre round the Cliff Street Schools, which had been closed, and, at the end of January, most of the cases that were reported to me seemed to be from this school, and they began to come in almost as soon as the school was re-opened; although the rooms had been thoroughly disinfected, as we thought. It turned out afterwards that some Plasticine and similar substances which are used for making models, etc., had been locked up in a cupboard during the time that the school had been closed, and it seems certainly within the bounds of possibility that these may have been the means of spreading the disease as soon as the school was opened. I had these burned, and disinfected the cupboard where the material had been kept. About the same time, cases began to be notified from St. John's School, and also from Green Lane, and it soon became apparent that we were in for a general epidemic, and so it proved. I tried my usual practise in dealing with the disease, viz. : I had all infectious cases and children from infected houses excluded from school, and each day the School Attendance Officer reported to me any cases that were away from school whose appearance or symptoms were at all suspicious, and I made it my duty to visit these, and in this way I got into touch with several children who were being kept off school, but who were not having any doctor, yet had the fever. I did not find any case in which it seemed to be advisable to prosecute, as in all cases there seemed to be complete ignorance of the nature of the disease from which the children were suffering. The process of exclusion mentioned above failed to stop the spread of the disease, and I had to recommend the Council to close the St. John's Schools, Cliff Street Schools, St. Michael's, Church Street Council, and the Helredale Schools, on March 15th, and, three days later, the same method of dealing with the trouble had to be adopted at Cholmley School, partly owing to the intermixing of these scholars with the scholars from the other Church Street Schools, and partly owing to a very common and very persistent epidemic of Conjunctivitis in the school. After the schools were closed, there was an improvement as soon as the notifications of those infected before the schools were closed had come in, and it was not before time, as I had 21 cases notified in the first fortnight of March. Notifications still continued to come in, but not in such large numbers, until May, when they came in again, nearly as badly as ever, and this continued through June. These cases came from practically all the schools in the

town, and, without closing them all again, it seemed almost impossible to deal with the epidemic. I had almost decided to do this when the numbers suddenly began to decrease, and, in July, there were only 8, and 5 of these were in two houses. In the early part of August, there were 6 cases, 3 of which were in one house; and then 2 cases at the end of this month finished the notifications, except for one on September 26th, in a house where there had been a case before.

In the first quarter there were 53 notifications, in the second 52, in the third 17, and in the fourth 1, making a total of 123, a number which easily holds the record, so far as Whitby is concerned. It is true that there have been a number of cases all over the country, but Whitby has certainly more in proportion than most places. I have had to send special reports to the County Council and the Local Government Board, dealing with this epidemic, and, at various times, have had to write to the School Managers, asking them to do certain things which I recommended; and I should like to acknowledge the ready way in which they have carried out my suggestions. I wrote early in the year, and asked them to arrange to have the schools disinfected each Saturday, and, later, I wrote asking them to use some form of disinfecting preparation (suggesting Carbolicine) in the cleansing of the schools. I have also had to ask the Sunday School Managers to help me by closing their schools during the time that the day schools have been closed, and again I have met with a ready response. During the time that the epidemic was on, I also was the means of stopping some children's entertainments, which would, in all probability, have helped to spread the disease. In the early part of January, I noticed a child in the street who had been notified to me as suffering from Scarlet Fever; she was being taken to the town to do some shopping. I sent her home, and advised the Council to take proceedings in the case. The parent was brought before the Magistrates, and convicted, and a nominal fine was imposed. Out of the cases notified to me, 3 were imported—one from Scarborough and two from Léeds. The figures in connection with this epidemic are interesting in many ways. For instance, the number of houses that have had 2, 3, 4, or even 6 cases in them is very large. I give them in the following table:—

Houses with 1 case	2 cases	3 cases	4 cases	6 cases
59	15	7	2	1

It will be seen from these figures that there have been 61 cases in 25 houses (this is after deducting 4 cases which were notified last year—one in a house where there were three



patients, this year, and three in a house where there were four altogether). There can be no doubt that secondary cases are much more common in those nursed at home than in those treated in Hospital—meaning by “secondary” cases, those which break out during the time that the first case is being nursed—as compared with so-called “return” cases, which occur after a patient has been set free from isolation. I find that there have been only 3 “return” cases from the 71 cases treated in Hospital, as compared with 6 in the 53 cases treated at home. This is satisfactory, but it is not up to our usual standard, as I find, on referring back a number of years, that we have never had a return case before, and I take it that these were due entirely to the crowded condition of the hospital, and the inability to use the precautions which we generally use there, and which have proved so satisfactory in the past. I might say that two of the 3 cases were in one family, pointing to some carelessness in the home, as they occurred after two children had been discharged at intervals of some weeks. The “Return” rate works out at 4.3 per cent for Hospital-treated cases, and 11.5 for home-treated cases. There was 1 death from Scarlet Fever in the town, giving a death-rate of 1.9 per cent.; and 3 deaths in Hospital, one of which was in a patient admitted last year, and, as this is not included in the number of cases treated there this year, the death-rate works out at 2.8 per cent, and, of the 2 cases that died there, one died from Tubercular Peritonitis, and the other from Pneumonia complicating Scarlet Fever. I think it is only fair that the Peritonitis case should be excluded, and the death-rate would then work out at 1.4 per cent. During the worst of the epidemic, I had to open the wards which some years ago were used for Small-Pox, and we found them very useful. The difficulty was to get someone to do the work apart from the nursing, and I got the mother of one of the children to go up to do this, but, unfortunately, she got Scarlet Fever, and one of the nurses who was there also suffered the same fate.

There is no doubt that the difficulty in stopping the disease from spreading has been the mildness of so many of the cases, making it very difficult, if not impossible, to recognise them when they have been seen by a medical man; and so mild that in a very large number of cases, parents have not thought it necessary to send for medical advice at all. I have been very much helped by the teachers of the various schools, and also by the School Attendance Officer, and am pleased to take this opportunity of mentioning their help.

I have had rather a curious experience this year in the Isolation Hospital, as we have had 3 cases which have had a second attack while still in Hospital, suffering from and convalescent from Scarlet Fever. And I have had 3 other cases, which I believe were the same, only I am not able to say what the first attack was like, as I did not see it. The details of these cases are interesting, and are as follows:—

(1) Admitted with Typical Rash on April 21st. Typical rise of temperature, with characteristic throat and rash, followed by the “Strawberry Tongue” of the disease, and peeling. On May 19th, the child had a rise of temperature to 101.2, with typical throat, rash, tongue, and peeling to follow.

(2) Case admitted with typical throat, rash, and rise of Temperature, on April 13th. On May 25th, there was a rise of temperature, preceded by vomiting and a typical rash, throat, tongue, and peeling, which commenced on the face and body, while the child was still peeling on the feet from the previous attack.

(3) Case admitted with typical rash, throat, tongue, and peeling on July 9th. Sickness, fever, typical rash, and throat again on August 13th, followed by peeling.

Three other cases were said to have had rash, etc., before admission, but which had disappeared. These are not included, as I was not able to confirm them.

TYPHOID FEVER.—This year, Whitby’s record for Typhoid has been broken. Up to this year, I have only had 4 unimported cases notified in the last 10 years. In March, a case was notified to me that had been imported from Rosario; this one recovered. On July 23rd, a case was notified from the Railway, and I had an intimation from the doctor who was attending this case that he had another suspected case, and I also had a case in the country, who had come from Whitby, and had evidently been infected about the same time as those in the town. I also found out that there was in the house from which this girl had come, a child who was suffering from a Gastric Feverish attack. On making enquiries, I found that all these were having the same milk supply. I visited the farm from which the milk came, and found it to be a model of cleanliness; the cow-house was clean, and had been whitewashed recently; the cows were free from the filthiness which is so often seen; one of the cows had been ill about 3 weeks or a month before this out-



break, but it was taken ill at night, and was well again in the morning, and I was able to ascertain from the Veterinary Surgeon who attended it, that there was no suspicion of anything infectious about it. There had been no illness in the house, and everyone was quite healthy. The milk was collected in the cowshed, and, as there was no dairy, it was removed straight into the cart, for delivery in the town. There were no drains on the farm, as the conveniences were of the midden variety. Slop water was taken on to the midden, which drains about a 100 yards into a beck. The cans for delivering the milk were washed out with cold water, and were then scalded with boiling water. The water supply is from the Whitby Waterworks Company, and it was not with the water, but its mode of delivery, that I found fault, and also with the tank in the farmyard where it was stored. The stop-tap is about 2 feet from this tank, which is used for all purposes in the yard, and, when turned on, the water from it is delivered through the bottom of the tank, which is made of stone, and used for storage purposes. I had a sample of milk taken from one of the infected houses, and it was found to be quite free from the specific organisms of Typhoid. In two more days I had a sample taken from the farm, and also one from the other end of the delivery, again with negative results, so far as the specific organism was concerned; but there were a certain number of organisms showing: "Slight evidence of farmyard contamination." I now had two more cases of Gastric Irritation brought to my notice, and also in the same house as these a definite case of Typhoid, which, like the others, gave a definite Widal Reaction, showing the undoubted nature of the cases, although they were mixed up with others which were just as clearly not Typhoid. I also had another case notified, which had got to the same stage of the disease as all those in the town and the one in the country, and these also had the same milk supply. I next had the water from the tank at the farm tested, and also another sample of milk from the farm, and the milk was again negative, so far as the specific organism was concerned. In the water, however, there was evidence of contamination, not with Typhoid, but with "sewage"; and the report adds that the sample is presumably from a farmyard pond, and is unfit for domestic purposes of any nature. Before this report was received, I had ordered the tank to be cleaned out and limewashed, and I also recommended that the delivery of water should be over the tank, instead of through the floor. No direct evidence of Typhoid contamination was found either in the milk or in the water, but there was evidence in the milk of an organism

which was quite capable of setting up considerable Gastric Irritation, and which would probably account for the cases of Diarrhœa and Sickness which were not Typhoid, but were mixed up in the same house where the Typhoid cases were. The definite cases had been infected about 3 weeks before I had any information to work on. Allowing a fortnight for the incubation, and a week after the first symptoms before the cases were recognised, as I have evidence of sewage contamination of the water that was used for all purposes in the yard, I think that there can be very little doubt that, about three weeks before this outbreak, there had been contamination of the milk which was capable of producing Typhoid. All the cases were infected in the course of two or three days, and there has not been anything of the kind again. I shall take care that in future the water-tank, which I think has been the cause of all the trouble, is regularly cleaned out and limewashed. I think the intermittent water supply is a source of danger, as a vacuum is created in the pipes, which must, of necessity, suck in any dangerous material if there is a leakage in the pipe, and this is in contact with a dangerous material. The second outbreak was in the Workhouse, and the first case was a woman, who had been an inmate of the Workhouse for some time, but had been out on the "road" from August 28th to August 31st. She first felt sick on September 18th, and went about for some time before she was suspected of being the victim of Typhoid. She was notified on October 19th, and removed to the Hospital the same day. The second case was notified on November 6th, and she had been sick and seedy for some time before she said anything about it. She had been in the wash-house, where the other women's clothes were washed, and had probably helped to wash them. On November 9th, a small boy, whom the last-named had been nursing while she was seedy, was notified. The next case was notified on November 29th, and again this was from the woman's end of the Workhouse, and she also had been employed in the wash-house, and on the same day the child of the second case was notified. Then, on December 5th, another child was notified, who had come from the same part of the house. It seemed to me likely that these cases had all been infected in some way or other from one another, but, as a matter of precaution, I had the milk supply and the two water supplies analysed, and got an entirely negative result, except about the supply of water, which is pumped up from a well, and this was reported to be slightly contaminated, but not with Typhoid. I found that the water supply goes into two open cisterns, and does

not come direct from the service main. This is a bad arrangement, and will, I think, be altered. I had all the drains tested with the smoke test, but they were all found to be satisfactory. As there seemed to be a possibility of someone being ill with the disease, and well enough to walk about, I had all the inmates confined to bed, and, with the Medical Officer for the Workhouse, went carefully over them, but found nothing to arouse suspicion. The special report which the Medical Officer and I sent to the Local Government Board had the effect of an Inspector being sent down, and we then had the Fæces of the inmates analysed, in case there might possibly be a "carrier" amongst the inmates, but again this was found to be negative. I think, therefore, my original theory of the outbreak was the correct one, and in this opinion I was supported by the Local Government Board Inspector.

## 2.—SANITARY WORK OF THE YEAR.

The District has been frequently inspected by me, sometimes with your Inspector, and sometimes alone.

The Inspector sends me the following report for the year :—

Patients removed to the Hospital—

Scarlet Fever	...	...	...	...	...	73
Typhoid Fever	...	...	...	...	...	6
Diphtheria	...	...	...	...	...	2

93 rooms in private houses have been disinfected, and all the Public Elementary Schools in the town—at least 50 rooms—have been disinfected.

Notices served under the Housing of the Working Classes Act to have rooms made fit for human habitation, 4.

14 W.C.'s have been provided in place of 25 Privies, and notices sent out to provide 4 more in place of 5 Privies. One of these was done by the Council, and the owner of the property was charged with the cost; and, at the end of the year, legal proceedings seem to be pending about others.

58 Privies and Ashpits have been put into order.

Many Houses have been inspected for overcrowding, and, where overcrowding has been found, the evil has been remedied.



In one House, notice was given that it should be limewashed and cleaned.

Under the Factory Act, 1901, several Jet Shops and Work-rooms have had notice to clean and limewash.

The Public Bakehouses have been inspected, in company with the Medical Officer of Health.

The Milk Shops, Cowsheds, and Dairies have been inspected.

In 12 cases, nuisances arising from Choked Drains have been abated.

In 2 cases, dangerous approaches to houses have been made good.

Several Drains have been tested for Sanitary Certificates.

The Drains at the Workhouse have been tested.

Several Inspections with the Medical Officer of Health have been made.

The Slaughter-houses have been inspected twice a week.

The Common Lodging-houses have been inspected at uncertain times, once a fortnight.

HOUSING OF THE WORKING CLASSES.—During my inspections this year, I have found a very considerable amount of improvement in the condition of the yards. Last year, I went exhaustively into the condition of these parts, and took the yards separately, and described their sanitary condition and the structure of the dwellings. Many of the stacks of property that I condemned last year have been put into good repair, and are again inhabited. Take, for example, the property in Low Hospital Yard. This has been repaired in such a thorough manner that it has made a very good lot of property, and is fit to be inhabited by a nice class of tenant. In McClachlin's Yard, a very considerable amount of improvement has been effected by the rebuilding of some of the tumble-down property that has long required some attention. In Brewster's Lane, the property that I condemned has been put into a thorough state of repair, and

is now made into a nice stack of tenements. In Kiln Yard, a complete transformation scene has been enacted. I last year condemned some property there which was in a shocking condition. This has been completely repaired, and the yard has been re-flagged, and the whole condition is most satisfactory. The property in Cappleman's Yard has changed hands, and here, again, there is a very marked change for the better. The houses have been repaired, new large windows have taken the place of the old small ones, and, with the new coat of paint that has been put on, the houses have a most inviting appearance, and, from being nearly empty, these houses are nearly all tenanted. The property that is known as Wear's Yard has been bought, and turned into warehouses and showrooms, and I am glad to know that such a fate has befallen it, as it now gets out of my hands in a satisfactory manner, after being under supervision for many years. The property that I spoke of last year, at the top of Boulby Bank, has not received the attention that I expected it would receive, and I am afraid that, before long, I shall have to take some further steps to have some more alterations done to it. This year, the new owner had notice served on him to have two W.C.'s put in, but, up to the present, it has not been attended to. In my last Report, I called attention to a stack of property at the bottom of Bolton's Yard, which was very insufficiently provided with sanitary accommodation; this is having two W.C.'s put in. The channel in Hamilton's Yard has not yet been attended to; and, I am sorry to say, the property in Renwick's Yard has not been done. This is in a very unsatisfactory condition, but, unfortunately, the property belongs to three different owners, who cannot all agree as to what should be done. There is still a lot of property that is scarcely bad enough to condemn, but is, nevertheless, in a very bad condition, and it will probably, before long, have to be dealt with in a drastic manner. There are, again, some yards, like Cockpit Yard, which are dirty and out of repair, but are tenantless, or have only an odd tenant in them. Some of these are difficult to deal with, from the owner's point of view. I should have thought that it would be better either to close them altogether, or to put them into repair, as it cannot be satisfactory to have property of this kind, which is always inhabited by the worst kind of tenant, who probably either pays no rent or who pays it very irregularly; and there is always the danger of the Medical Officer of Health coming down upon the property and condemning it. With the above exceptions, the houses in the town seem to me to be very much improved during the last few years.



COMMON LODGING-HOUSES.—There are now two of these in the town, and they both comply with the insufficient regulations that deal with them. They are regularly visited by your Inspector, and he reports that they are clean and satisfactory. No case of infectious disease has occurred in them during the year.

OFFENSIVE TRADES.—For some time, bone-boiling has been carried on just outside the town, and I have had many complaints about it. I have visited the place repeatedly, and this year, after several visits, I found a most objectionable condition of things. I have arranged that a special boiler shall be put into the place, so that the fumes pass through the fire, and in that way lose much of their offensive smell.

COWSHEDS AND DAIRIES ACT.—There are 24 registered cowkeepers in the district, and 25 who are purveyors of milk, but not cowkeepers. There is no doubt that, since the adoption of the Dairies, Cowsheds, and Milkshops Order in 1902, much has been done to safeguard the milk supply to the town, and I very much regret that the same order is not adopted by the Rural Council, from whose district much of our milk supply is derived. I would like to again call your attention to some suggestions that I made in my last Report, which I think would be of very great advantage if they were adopted, and they would not cost more than a few shillings. During the year, I have tested the milk from 16 supplies, taken by your Inspector from any of the milkmen whom he happened to meet, and I should say that they are fairly good average specimens. The standard that is allowed is Specific Gravity from 1020 to 1040, and the amount of cream 6 per cent. to 15 per cent. The samples that I have had give an average of 1039.09 for all specimens, 1032.16 for the morning specimens, and 1033.4 for the evening specimens. The cream works out at 10.5 per cent. for all specimens, and 10.3 per cent. for the evening, and 9.93 per cent. for the morning ones. The following table gives the exact amounts in a tabular form:—

a.m. July 28	(1)	...	1035	...	8	per cent. of cream
	(2)	...	1030	...	12	„ „ „
p.m. July 29	(3)	...	1033	...	9	„ „ „
	(4)	...	1035	...	11	„ „ „
p.m. Nov. 15	(5)	...	1033	...	11½	„ „ „
	(6)	...	1035	...	13	„ „ „

a.m. Nov. 16	(7)	...	1035	...	9	per cent. of cream
	(8)	...	1033	...	9	„ „ „
p.m. Nov. 16	(9)	...	1030	...	11	„ „ „
	(10)	...	1033	...	8½	„ „ „
a.m. Nov. 17	(11)	...	1035	...	10	„ „ „
	(12)	...	1035	...	13	„ „ „
p.m. Nov. 17	(13)	...	1035	...	9	„ „ „
	(14)	...	1035	...	10	„ „ „
a.m. Nov. 18	(15)	...	1035	...	9	„ „ „
	(16)	...	1035	...	12½	„ „ „

Since your Inspector sent the notices to milksellers—that they were not to carry pig-pails in their milk-carts, the practice has, I believe, entirely stopped, or, at any rate, I have not heard of it.

A case of Anthrax was reported in August, on a farm in the Rural District, which supplied milk to the town. The case was dealt with by the Police, according to the Anthrax Regulations, and no further case was reported.

SEWERAGE.—Nothing has been done since my last Report, except that many more ventilating shafts have been erected, and in each case with good results, and there is rarely any complaint about the manholes smelling.

WATER SUPPLY.—This is of excellent quality, and I never hear any complaints about it, nor is it possible to trace any disease to it.

SALE OF FOOD AND DRUGS ACT.—No action has been taken under this Act during the year.

RAINFALL.—This has been 19 for the year, which is very low, even for Whitby, the average being about 25 inches.

SLAUGHTER-HOUSES.—There is nothing to be added to my previous Reports about these; the old objections still hold good, and none of them are remedied. No case has come before my notice in which I have thought it necessary to interfere with the sale of meat; the meat, generally speaking, is of good quality. I am glad to learn that the pole-axe is being less and less used, and that one of the instruments which I spoke of last year is steadily gaining in favour with the butchers.

### 3.—WORK DONE IN THE ISOLATION HOSPITAL.

This has been very heavy during the year, and at times the staff has been very hard worked indeed. I feel that I should not be doing my duty if I did not make mention of the good work done by the Matron, under very trying conditions, as, when the Scarlet Fever epidemic was at its height, it was necessary to open up every part of the Hospital, and it was very difficult to get sufficient help in the kitchen, and the Matron often had the cooking to do, in addition to a very large amount of nursing as well. One of the nurses that I got to help her took Scarlet Fever, and a charwoman who went up to help also got the disease. In all, 80 cases have been treated there this year.

# ANNUAL REPORT

## Of the Medical Inspector of School Children for the Whitby Urban District.

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*To the Chairman and Members of the Local Education Authority.*

GENTLEMEN,

I have pleasure in submitting my Report on the Inspection of School Children for the year 1909, and, in doing so, I should at once like to acknowledge the help that I have received during the year from the teachers in arranging the work so that it could be done with a minimum of trouble, in weighing and measuring the children, and in a number of other ways helping to make the inspections as easy as possible. Also, I should like to bear testimony to the efforts that they have, in a number of instances, made to have my suggestions carried out, and my notices to parents attended to. Also, I have received a considerable amount of help from your School Attendance Officer. The only thing that I regret about the inspections is that the teachers, and those in authority, have no more power to insist upon the defects that are found at the inspections being attended to by the parents or those who are responsible for the children. Personally, I must acknowledge that, when I started these inspections, I was very sceptical as to whether they were likely to do any good or not, and I began my work with mixed feelings. But every month that has passed has only tended to make me more keen on this work, and more and more certain that the work is on the right lines, and that what is wanted is power to deal with the defects that are found; and I believe that a great deal of good could be done if we had a School Nurse, who could go round amongst the people, and look up the children who have been found to be defective in any way. Short of compelling parents to do as they were advised, I think that this would do a great deal of good. In a small town like this, the expense is a serious matter, but I have made the suggestion that some arrangement might be made with the Urban District Council, so that a woman, suitable for the work, might undertake the



double duties of School Nurse and Health Visitor ; and I now make the suggestion again, and should be glad, with your permission, to bring the matter again before the District Council. I should say that, speaking generally, the Sanitary condition of the schools in the Local Education Area is good ; most of them have been built with due regard to ventilation, open areas round them, and they are, generally speaking, well supplied with light. The fault that I should find is not with the structure or surroundings, but rather with the cleanliness of them. In many of them, the floors are not kept as clean as they might be, and, when we had an epidemic of Scarlet Fever during the year, I wrote to the local authority, and suggested that it would be well if the floors were sprinkled each morning with sawdust, damped in a disinfectant, and that they should be brushed each morning before school commenced. In June, I wrote the following letter to the local authority :—“ I should like to make the suggestion that the schools under your management should be disinfected regularly. This can be done by using one of the disinfecting soaps, in place of ordinary soaps which are used for the school at the present time. There are several of these on the market, but I would suggest that ‘ Carbolacene,’ which is used at the Police Station, and also in a number of the schools in other parts, is the best. This is in a liquid form, and, being added to the water, it serves the purpose of both soap and disinfectant.” These letters have, I think, called attention not only to the need for disinfectant, but also the need for cleanliness. In speaking of the sanitation, ventilation, etc., of the schools, I should like to call attention to a practice which I think is a very bad one. I refer to the use of some of the schools for day-work, and afterwards—before the air can possibly get thoroughly changed—for night school. The consequence is that the air is constantly vitiated, and I have found that there has been more illness in schools used in this way than in others where this practice does not exist, and that, in one of the schools which was constantly being invaded by infectious trouble, there has been a very marked falling off in this direction since the school was used for day school only. So far as I am aware, we have no arrangements for drying clothes at any of the schools, but this is not nearly so important in a town school as it is in the country. So far as I know, there has been no interference on the part of the parents in trying to prevent the inspections, but I have noticed a great deal of healthy interest being shown in them, and, as a rule, a desire to take advantage of these occasions as far as possible. The number of parents who attend them is greater than I should



have expected, and they look upon the inspections as things to be encouraged, not to be resented. I am sorry to say it is in the parts of the town where the most defects are to be found that the greatest apathy exists, and those whom one might hope to benefit to the greatest extent are just those who do not come much to the inspections, except for a further opportunity of gossip and to pry into other people's affairs, and who are the least ready to have any defects remedied when their attention is called to them. That this is not universally the case is proved beyond doubt by the increase in the number of patients at the Public Dispensary after an inspection, and the large number of inquiries as to the best means of obtaining spectacles after an inspection has taken place. Speaking of spectacles, I have found great difficulty in obtaining them. We have no public institution here which supplies them, and the parents have generally to either beg them or allow the children to go without. I have been struck by the number of mothers who have had their children treated for Adenoids, and other defects; but there are a large number, who are found to have various defects, who never have these attended to. I have made it a rule to notify all parents of the approaching inspections, so that they had an opportunity to come if they wished to do so. Last year, I made some remarks upon the system of teaching, especially amongst the girls, and advocated some practical teaching in the management of a home, in personal cleanliness, and in the bringing up of children. This year, I feel that it is even more necessary to emphasise these suggestions. In 73, or about 1 to 10, of the children I have had to give the parents notice that their children's heads were dirty, and, as very few of the boys suffer from this defect, it is obvious that the number of girls must be nearer 20 per cent, or 1 in 5. This is a most disgusting condition of things, as in a very large number it was not a few nits that one had to complain of, but a wholesale crop of nits and vermin, showing that there had not been any serious attempt made to alter this condition of things; it seemed to be treated as quite a matter of course amongst a great many mothers that this state of things existed, and they seemed surprised that one should even draw their attention to it. Many of the offenders were girls about to leave school, and ought to have been quite capable of looking after themselves, and keeping themselves clean; and they ought to have sufficient self-respect and care for their personal cleanliness to take care such a condition of things did not exist. They come to school often with high-heeled boots, and all sorts of gay ribbons in their hair, and their clothes an attempt at

the latest fashion, while their heads are a mass of vermin. I know that anyone may get nits into her hair, and that they are not altogether easy to get rid of, but there is no doubt that they can be got rid of if a serious attempt is made to do so. It seems to me that these girls would spend their time better being taught some of the elements of cleanliness, etc., instead of being taught the advanced rules of arithmetic; the former will be of use to them, whereas the latter will probably never be so, and it seems lamentable that girls who have had education should be turned out into the world to make a living who have not got a knowledge of what comes next to Godliness. Take, again, the cooking that they are taught. I understand that they are taught to make "puff" pastry, and to ice cakes. It seems to me that they had better be taught to make bread, as I believe that I am right in saying that very few girls who go into service can make a good wholesome loaf of bread, and hardly any of them can tell one how to set to work to make a dinner, unless they have abundance of material to make it of. I should like to see all girls, before they leave school, taught to make a nourishing broth, to make porridge (which is scarcely ever seen in the houses of the poor in this country), and other things which would enable them to make the most of a small income. These suggestions may seem to be somewhat out of place in a Medical Inspector's Report, but they are vital to the health of these children when they get older, and also to offspring which may happen to be born to them in after years, and which will make the generation of the future a sorry generation, I fear, unless our systems are very materially altered! I have again noticed a very marked difference in the different schools as regards physique. For instance, it is noticeable what a different type is going to St. John's School from the type that I saw at some of the others. The parents are here better able to get their children what is necessary for their well-being, and they can also send them to a doctor if they ail anything. It is at this school that the parents turn up in large numbers, and are most anxious to hear what the Inspector has to say, and they are most anxious to follow his advice; whereas, in some of the other schools, where a very different condition of things exists, the parents do not come in such numbers; they do not take the same interest in the inspection, and they are not so ready to follow the Inspector's advice. This is very unfortunate, as it is especially to these parents that the inspection should be useful. I have to again report that a very serious condition of the children's teeth exists in most of the schools, and it is rarely that I have found a really good set of teeth. I made



the same comment last year, and I find that the same remark is very common in other parts of the country. This is a very serious matter, as undoubtedly a set of bad teeth cause a number of the cases of indigestion, etc., which come under the general practitioner's notice; even small infants of 3 and 4 years of age have often only two or three good teeth in their mouths, and, when we get on to later years, they are very bad indeed. We have no means of getting this defect attended to, as we have no School Dentist, and the only way in which such cases are treated is by extraction when the offenders begin to ache. 186 children are reported "bad," or "very bad," in this respect. In one, the report is: "Scarcely a sound tooth." In one school, 9 out of 10 are bad; in another, 7 out of 10. Something is being done in the schools in the way of teaching the children to brush their teeth, but I am inclined to think that the trouble arises in earlier years, if not in the first few months of life, and that it is some alteration in the feeding of children which is necessary to do away with this increasing evil. Again, older girls could be taught how babies should be brought up and cared for, and I believe that such instruction would be of immense service to these girls when they in later years undertake the responsibilities of motherhood. Last year, the only children who were examined were those who were leaving or joining school, but this year the number has been greatly increased, and I am sure with very great benefit. It was impossible to test the eyes of children who could not read; and the number of children who have been found to have defective eyesight at the age of 7 or 8, amply justifies the increased expense and trouble entailed in these examinations. Again, it has been found to be much more satisfactory to examine the children who have reached the age of 13, rather than to have "those leaving school" inspected; so many of these were missed, as they had, in a large number of cases, left school before the medical inspection took place. We have no special school here. I have reported two cases to the Education Authorities, and one of these—a case of very defective vision—is now waiting his turn to get into one of the schools where special attention is given to such cases. We have no School Clinic here, but those who want attention can obtain it at either the Public Dispensary or at the Cottage Hospital. I have only come across one case of Zymotic disease during my inspections. This was a case of Chicken-Pox, and it was at school with the rash full out, and I believe it was the first of a series of cases in the school it was attending. We unfortunately had the biggest epidemic of Scarlet Fever this year that I can remember, and, after

trying the usual methods of excluding all infectious children, and the members of their family, I found that the disease was gaining ground so rapidly that I had to recommend the Council to order the closing of St. John's, Cliff Street, St. Michael's Church Street Council, Helredale, and Cholmley schools. I also had to take into account, in the closing of the Cholmley School, the presence of a large number of cases of Conjunctivitis which had been found in the school.

(1) Number of visits paid to schools or departments, 36.

(2) Total number of children inspected, 748.

(3) No. of children inspected.

		Aver. Hght.		Aver. Wght.	
		ft. in.		st. lbs.	
At 3 years of age, males	33	...	2 11 $\frac{3}{4}$	...	2 2 $\frac{3}{4}$
"    "    "    females	31	...	3 0	...	2 1 $\frac{1}{4}$
At 4 years of age, males	26	...	3 5 $\frac{1}{2}$	...	2 8
"    "    "    females	37	...	3 2	...	2 7 $\frac{3}{4}$
At 5 years of age, males	50	...	3 4	...	2 11 $\frac{1}{2}$
"    "    "    females	34	...	3 4	...	2 9
At 6 years of age, males	22	...	3 6 $\frac{3}{4}$	...	3 1 $\frac{3}{4}$
"    "    "    females	24	...	3 6	...	3 2 $\frac{1}{2}$
At 7 years of age, males	108	...	3 10 $\frac{1}{2}$	...	3 7
"    "    "    females	84	...	3 8 $\frac{1}{4}$	...	3 3
At 8 years of age, males	58	...	3 9 $\frac{1}{4}$	...	3 4 $\frac{3}{4}$
"    "    "    females	23	...	3 10	...	3 5
At 9 years of age, males	8	...	3 8 $\frac{1}{4}$	...	3 12 $\frac{1}{4}$
"    "    "    females	1	...	4 1 $\frac{1}{2}$	...	3 10
At 10 years of age, males	7	...	3 8	...	4 3
"    "    "    females	1	...	3 4	...	3 4
At 11 years of age, males	2	...	3 10 $\frac{1}{2}$	...	4 9 $\frac{1}{4}$
"    "    "    females	4	...	4 3	...	4 4 $\frac{1}{2}$
At 12 years of age, males	19	...	4 4	...	4 9 $\frac{3}{4}$
"    "    "    females	19	...	4 8	...	5 4
At 13 years of age, males	68	...	4 7 $\frac{1}{2}$	...	5 4 $\frac{3}{4}$
"    "    "    females	66	...	4 10	...	5 9
At 14 years of age, males	12	...	4 10 $\frac{2}{3}$	...	6 0 $\frac{1}{2}$
"    "    "    females	9	...	5 0 $\frac{1}{2}$	...	6 2

At 15 years of age, Nil.

(4) Number of children referred for subsequent or further examination. Several for eye-testing.

(5) Number of children in respect of whom directions were given for treatment of defects, 175, or 1 in 4.27.

(6) Average time per head occupied by inspection. This, of course, varies very much, according to circumstances. Where the children are weighed and measured, and where they do not want eye testing; as, for instance, amongst the infants, the time is much less than it is in other schools, where these have all to be done at the time of the examination. I find that my knowledge of the children derived from my local practice, and also from my acquaintance with very many of the families in other ways, has been a great help to me, and is also a great saving of time, as many of them are known to me more or less intimately.

(7) I have already referred to the work that the teachers have done, and I have had no difficulty in working with any of them.

(8) I have interfered with the work of the school as little as possible, but it is impossible to go into one of these schools, where the amount of space is limited, and take possession of one of the few class-rooms, and have the parents sitting in another one, without interfering with the work of the school.

(9) Classification of defects in respect of which notices were sent to parents:—

1.—Cleanliness of skin ... ..	3
2.—Cleanliness of head ... ..	73
3.—Tonsils and adenoids ... ..	28
4.—External ear disease ... ..	2
5.—Defective vision ... ..	42
6.—Defective hearing ... ..	2
7.—St. Vitus's Dance ... ..	1
8.—External Eye Diseases ... ..	1
9.—Eczema ... ..	1
10.—Referred to Education Authority ...	2
11.—Defective teeth ... ..	11
12.—Submaxillary Glands ... ..	1
13.—Recommended for open-air treatment	2
14.—Recommended to get Cod Liver Oil	2
15.—Infantile and other diseases ... ..	1
16.—Worms ... ..	1
17.—Chicken-Pox ... ..	1

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Yours faithfully,  
W. E. F. TINLEY.

December, 1909.



## 5.—WORKSHOPS AND FACTORY ACT OF 1901.

I have inspected the Bakehouses in the town, and I find them, generally speaking, satisfactory; one of them was in need of cleansing and whitewashing when I visited it. Whitby is not a manufacturing town, and the number of workshops is small, and these are used almost exclusively for the making of wearing apparel, etc., and for making the small amount of jet ornaments which are made here now. There are 12 places in the town which come under the head of factories, 40 workshops, and 4 which come under the head of work-places. There are 16 workshops used for millinery work, 5 for jet-making, 1 for confectionery manufactory, 1 used as a laundry, 4 joiner's shops, 12 bakehouses, and 1 herring-house. There are 14 out-workers in the town, 13 of whom are employed in making wearing apparel, and 1 in making furniture. No case of infectious disease has occurred in any of the workshops. Several of the shops have been ordered to be whitewashed, and the orders have been complied with. Appended are 6 forms which the Local Government require to be filled in, showing the health of the town in tabular form.

Yours faithfully,

W. E. F. TINLEY.

January 3rd, 1910.

# VITAL STATISTICS OF WHOLE DISTRICT DURING 1909 AND PREVIOUS YEARS.

Year.	Population estimated to Middle of each year.	Births.		Total Deaths Registered in the District.				Total Deaths in Public In- stitutions in the District.	Deaths of Non-Residents Registered in Public Insti- tutions in the District.	Deaths of Residents Regis- tered in Public Institutions beyond the District.	Nett Deaths at all Ages belonging to the District.	
		Number.	Rate *	Under 1 year of age.		At all Ages.					Number.	Rate.*
				Number.	Rate per 1,000 Births Registered.	Number.	Rate.*					
1899	—	285	21'49	44	134'3	208	15'68	No	No	No	No	No
1900	13,261	325	24'13	30	92'3	203	15'3	Record	Record	Record	Record	Record
1901	11,748	315	26'8	30	95'2	220	16'9	17	1	—	—	—
1902	„	276	23'4	24	86'9	196	15'9	19	4	—	—	—
1903	„	293	24'9	27	92'1	172	14'2	17	2	—	—	—
1904	„	253	21'4	28	110'6	200	16'7	21	3	3	—	—
1905	„	268	21'9	29	108'2	195	16'003	19	3	1	192	16'003
1906	„	277	23'5	35	126	169	14'3	26	6	2	167	13'4
1907	„	236	20'08	26	129	201	17'10	12	1	2	200	16'2
1908	„	276	23'49	30	108'8	193	16'42	24	5	0	188	16'002
Averages for years 1899-1908.	12,504'5	280'4	23'10	30'3	108'3	195'7	15'85	19'3	3'1	1'6	186'7	15'4
1909	11,748	278	23'6	26	93'5	180	15'32	29	6	1	168	14'29

\* The rates in these columns are calculated per 1,000 of estimated population.

Area of District in Acres (exclusive of area covered by water), 2,049a. 4r.

Total Population at all ages	..	11,748	} At Census of 1901.
Number of Inhabited Houses	..	2,632	
Average number of Persons per house..		4'46	

Institutions within the District receiving Sick and Infirm Persons from outside the District.	Institutions outside the District receiving Sick and Infirm Persons from the District.
COTTAGE HOSPITAL.  SEASIDE HOME.  UNION WORKHOUSE.	ISOLATION HOSPITAL.  As Whitby is a seaport, and large numbers of men sail from it to foreign ports, it is impossible to fill in the number of Institu- tions receiving Sick belonging to the District.
Is the Union Workhouse within the District? Yes.	

## VITAL STATISTICS OF SEPARATE LOCALITIES IN 1909 AND PREVIOUS YEARS.

NAMES OF LOCALITIES: WHITBY, RUSWARP, AND HELREDALE.

Year.	Population estimated to Middle of each year.	Births Registered.	Deaths at all Ages.	Deaths under 1 year.
1899 .. ..	13,261 11,748	285	208	44
1900 .. ..		325	203	30
1901 .. ..		315	220	30
1902 .. ..		276	196	24
1903 .. ..		293	172	27
1904 .. ..		253	200	28
1905 .. ..		268	195	29
1906 .. ..		277	169	35
1907 .. ..		236	201	26
1908 .. ..		276	193	30
Averages of Years 1899 to 1908	12,504·2	280·4	195·7	30·3
1909 .. ..	11,748	278	180	26

## CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1909.

Notifiable Disease.	Cases notified in whole District.							Total Cases notified in each Locality.			Number of Cases removed to Hospital from each Locality.			
	At all Ages.	At Ages—Years.						Whitby.	Ruswarp.	Helredale.	Whitby.	Ruswarp.	Helredale.	Total Cases re- moved to Hsptl.
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.							
Diphtheria (including Mem- branous Croup)	7			2	1	3	1	2	5			2		2
Erysipelas ..	23			1	2	18	2	12	10	1				
Scarlet Fever	123	1	33	83	3	3		62	55	6	43	24	4	71
Enteric Fever	11			6	2	3		8	3		6			1
Puerperal Fever	3					3		2	1					
TOTALS ..	167	1	33	92	8	30	3	86	74	7	49	26	4	79

Isolation Hospital, Stainsacre Lane, Rural District.

Total available beds, 24.

Number of Diseases that can be concurrently treated, 3.



# INFANTILE MORTALITY DURING THE YEAR, 1909.

DEATHS FROM STATED CAUSES IN WEEKS AND MONTHS UNDER ONE YEAR OF AGE.

CAUSE OF DEATH.		Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	5-6 Months.	7-8 Months.	9-10 Months.	10-11 Months.	Total Deaths under 1 Year.
ALL CAUSES {	Certified	8	3	1	1	13	2	1	2	1	1	3	1	24
	Uncertified	..	..	..	..	..	..	..	1	..	..	..	..	2
Enteritis, Muco-enteritis, Gastro-enteritis		..	..	..	..	..	..	..	..	..	..	..	..	3
Gastritis, Gastro-intestinal Catarrh		..	..	..	..	..	..	..	..	..	..	..	..	1
Premature Birth		2	..	..	..	2	..	..	..	..	..	..	..	2
Congenital Defects		2	..	..	..	4	..	..	..	..	..	..	..	4
Atrophy, Debility, Marasmus		2	2	..	..	4	1	1	..	..	..	..	..	6
Rickets		..	..	..	..	..	..	..	..	..	..	..	..	1
Convulsions		..	..	..	..	..	..	..	..	..	..	..	1	1
Bronchitis		..	..	..	..	..	..	..	..	..	..	..	..	1
Pneumonia		..	..	..	..	..	..	..	..	1	..	1	..	1
Suffocation, overlying		..	..	..	..	..	..	..	..	..	..	..	..	1
Other Causes		2	1	..	..	3	..	1	1	..	..	1	..	5
TOTAL		8	3	1	1	13	2	2	3	1	1	3	1	26

Births in the year—Legitimate, 254; Illegitimate, 24.

Deaths in the year—Legitimate Infants, 24; Illegitimate Infants, 2.

Deaths from all Causes at all Ages, 180.

Population, estimated to middle of 1909, 11,748.



# CAUSES OF, AND AGES AT, DEATH DURING YEAR, 1909.

CAUSES OF DEATH.	Deaths at the subjoined Ages of Residents, whether occurring in or beyond the District.							Deaths at all Ages of Residents belonging to localities, whether occurring in or beyond the District.				Total deaths, whether of Residents or Non-Residents, in public Institutions in the District.
	All Ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.	Whitby.	Ruswarp.	Helredale	Leeds.	
Scarlet Fever ..	1		1					1				
Enteritis ..	3	3						2	1			
Gastritis ..	1	1						1				
Puerperal fever ..	1					1			1			
Erysipelas ..	1					1		1				
Phthisis (Pulmonary Tuberculosis)	11				1	10		8	3			1
Other tuberculous diseases ..	5			2	2	1		5				1
Cancer (malignant disease) ..	12					4	8	7	5			
Bronchitis ..	7	1	2				4	4	3			
Pneumonia ..	6	1	1		1	1	2	4	2			
Pleurisy ..	3					1	2	2	1			
Premature birth	2	2						2				
Diseases and Accidents of parturition	3					3		3				
Heart diseases ..	20	1				7	12	12	8			1
Accidents ..	5	1	1			2	1	5				2
All other causes ..	99	16	3	5	6	24	46	67	30	2	1	24
All causes ..	180	26	7	7	10	55	75	124	54	2	1	29

## Administration of the Factory and Workshop Act, 1901,

IN CONNECTION WITH

**FACTORIES, WORKSHOPS, LAUNDRIES,  
WORKPLACES & HOMEWORK.****1.—INSPECTION.***Including Inspections made by Sanitary Inspectors or  
Inspector of Nuisances.*

					Number of Inspections.	Written Notices.
FACTORIES (Including Factory Laundries) ..	..	14			0	
WORKSHOPS (Including Workshop Laundries) ..	..	5			0	
WORKPLACES (other than Outworkers' Premises included in Part 3 of this Report .. .. .)	..	3			0	
Total .. .. .	..	22			0	

**2.—DEFECTS FOUND.**

					Number of Defects. Found.	Remedied.
Nuisances under the Public Health Acts:—						
Want of Cleanliness .. .. .	..	4			4	
Sanitary Accommodation not separate for sexes	..	1			1	
Total .. .. .	..	5			5	

NATURE OF WORK.	OUTWORKERS' LISTS, SECTION 107.				Number of Inspections of Outworkers' premises.
	List received from Employers once in the year.		Number of Addresses of Outworkers.		
	Lists.	Outworkers.	Received.	F'ward'd.	
Wearing Apparel— Making, &c. ..	8	14	0	0	0
Artificial Flowers ..	1	0	0	0	0
Furniture and Upholstery ..	1	1	0	0	0
Total.. ..	10	15	0	0	0

**4.—REGISTERED WORKSHOPS.**

Workshops on the Register (s. 131) at the end of the year.							Number.
Millinery ..	..	..	..	..	..	..	16
Jet Working ..	..	..	..	..	..	..	5
Confectionery ..	..	..	..	..	..	..	1
Laundry ..	..	..	..	..	..	..	1
Joiners' Shops ..	..	..	..	..	..	..	4
Bakehouses ..	..	..	..	..	..	..	12
Herring House ..	..	..	..	..	..	..	1
							—
Total number of Workshops on Register							.. 40
							—

**5.—OTHER MATTERS.**

		Class.	Number.
Underground Bakehouses (s. 101):—			
In use at the end of the year ..		.. ..	3



